



STATE OF IOWA

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DEPARTMENT OF HUMAN SERVICES
CHARLES M. PALMER, DIRECTOR
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January 17, 2014

Sherry Lustgraaf
1016 Cachelin Dr.
Carter Lake, IA 51510

Dear Child Care Provider,

This letter is in regards to the January 14, 2014 compliance check of your Level A, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.4 No more children are in care than the rules for the specific category will allow. **Provider was seriously over numbers. She had 13 children present. Her current Cat only allows 6 children. Provider signed an agreement with DHS that after today she would not be over numbers again.**

DHS compliance pulled payments from November 25, 2013 to January 2, 2014. Provider was over numbers on the following days: 11/25/13, 11/26/13, 11/27/13, 11/29/13, 12/2/13, 12/3/13, 12/4/13, 12/5/13, 12/6/13, 12/9/13, 12/10/13, 12/11/13, 12/12/13, 12/13/13, 12/16/13, 12/17/13, 12/18/13, 12/19/13, 12/20/13, 12/23/13, 12/24/13, 12/26/13, 12/27/13, 12/30/13, 12/31/13, 1/2/14 and 1/3/14. Central office has been notified of provider overbilling and being over numbers.

If the provider continues to be over numbers then DHS will revoke registration and provider will not be able to register for at least a period of 12 months.

☐ 110.5(1) Conditions in the home are safe, sanitary, and free of hazards. *The provider is remodeling and the rooms she is using are in a state of remodeling. The area between daycare room and room where video games/tv is in does not have walls and there is no barrier between the children and heater unit.*

☐ 110.5(1)a Numbers for each child's parent, physician, and a responsible person are accessible by the phone. *Provider had children's parents in cell phone but did not have physician or responsible person in the phone. Substitute would also need access to the information as well.*

☐ 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child. *The provider uses a cupboard above the toilet to store medicines. This is not high enough. The provider should move medicines or put a lock on the cupboard to ensure children cannot get into them during daycare hours. Provider agreed to correct immediately.*

☐ 110.5(1)c First-Aid supplies are available and easily accessible in the home, outdoor play area, any vehicle used to transport children, and on field trips. *The provider does daycare on the main level and basement level. There needs to be a first aid kit on each level and in the vehicle to transport children.*

☐ 110.5(1)f Combustible materials are kept away from furnaces, stoves, gas dryers, or water heaters. *There was laundry next the furnace/water heater. These need to be moved away from the immediate area.*

☐ 110.5(1)h A safe outdoor play area is maintained in good condition throughout the year. *The provider does not have a play area in the backyard and reports they go to the park which is within policy and procedure.*

☐ 110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits. *Provider reported they were painting and did not have these posted. DHS compliance staff observed them in a file. On 5/13/2013, the provider did not have these posted during compliance check.*

☐ 110.5(1)j The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas.

☐ 110.5(1)k Fire and tornado drills are practiced monthly and documentation kept. *Provider did not have a record of these being completed in 2013 and has not started a new record for the 2014 year. In check in 5/2013, the provider did not have these records.*

☐ 110.5(1)n Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. *The provider did not have any smoke detectors up in the downstairs rooms where children were playing. The provider did not have smoke detectors up at the top of stairways.*

☐ 110.5(1)n Each smoke detector is tested monthly, and a record is kept for inspection purposes. *The provider did not have records of this and smoke detectors are not up in the appropriate rooms.*

☐ 110.5(1)o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and www.iowasmokefreeair.gov. *The provider had non-smoking sign on the front door but did not have the phone number or website to report complaints. Provider needs to ensure signs are posted at every entrance to the home and in vehicle.*

☐ 110.5(1)r Fence for aboveground pool is four feet above sidewalls of pool. Height of pool walls not included in measurement. *The pool is currently full and within access of children from the back door of the house. The fence must be put up and be at least 4 ft. above the top of the pool.*

☐ 110.5(1)s Written permission from the parents is on file. *Provider needs to include permission for older children to swim in the pool in the summer and these must be included in the file.*

☐ 110.5(1)s Equipment needed to rescue a child or adult is accessible. *Provider needs to ensure this equipment is out during the summer time.*

☐ 110.5(1)v The provider has written policies about responding to health-related emergencies. *Provider did not have this. DHS requires the following:*

You should have a written policy outlining the procedures and actions you will take in the event of a health-related emergency. The policy should address the following:

- ◆ First aid measures
- ◆ Contacting emergency medical services
- ◆ Transporting of an ill or injured child
- ◆ Contacting parents
- ◆ Care for the other children in your care during the emergency

COMMENTS: Assistance with developing policies is available from your child care health consultant at your child care resource and referral agency.

☐ 110.5(2) A provider file is maintained and contains:

☐ 110.5(2)a A physician's signed statement of health and immunization status on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated every two years. *The provider had only immunizations for two of own children and no physicals. There were no physicals or immunizations on file for provider or rest of family. The physical for her husband expired earlier in the month. This was out of compliance during 12/2011 check.*

☐ 110.5(2)d An individual file is maintained for each substitute and contains:

☐ 110.5(2)d A completed DHS Criminal History Record Check, form B, 595-1396.

☐ 110.5(2)d A completed Request for Child Abuse Information, form 470-0643

☐ 110.5(2)d A physician's signed statement of health of at the time of employment and at least every two years thereafter. *The physical expired on 1/5/14 and sub needs a new one.*

☐ 110.5(2)d Certification of two hours of approved training relating to identification and reporting of child abuse within 6 months of employment and repeated every 5 years. *The substitute did not have this completed. This was also not completed during the check in 5/2013.*

☐ 110.5(8) Children's Files

☐ 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains: *The provider did not have files for 3 children and all of the other 10 files had missing or expired information. The following is needed in each file.*

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.

☐ 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually.

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.

☐ 110.5(8)g A signed and dated immunization certificate provided by the state department of public health.

☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.

☐ 110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the child.

☐ 110.5(10) Substitutes

☐ 110.5(10)d Use of a substitute is limited to: No more than 25 hours per month. An additional period of up to two weeks in a 12-month period. *It is unknown as to whether provider is compliant as she does not keep track.*

☐ 110.5(10)e The provider maintains a written record of the number of hours substitute care is provided, including the date and the name of the substitute. *Provider does not keep track. She was non-compliant with this during check on 5/2013.*

☐ 110.8(1) SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "A" ***Provider was seriously over numbers. She had 13 children in the home in addition to her own school age children. Provider has been over numbers consistently for at least the last 30 days. Provider agreed to not take 2 children whose daycare provider is closed, explain to one family that she cannot take their school age children and that the younger sibling must be picked up before the end of the school day to ensure she is within numbers. Provider agreed to not be over numbers starting 1/15/2014.***

☐ 110.8(1)a Not more than six preschool children present at any one time including infants.

☐ 110.8(1)a Of these six children, not more than four children who are 24 months of age or younger are present at any one time.

☐ 110.8(1)a Of the four children under 24 months of age, no more than three may be 18 months of age or younger.

☐ 110.8(1)a Not more than two additional school-age children for less than two hours at any one time.

☐ 110.8(1)a Not more than eight children present when the emergency school closing exception is in effect.

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☒ Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home. This visit will occur after the 45 day time period has elapsed.

If you continue to remain out of compliance then DHS may initiate revocation of registration.

Please do not hesitate to contact me at DHS at (712) 328 - 5713 if you have any questions regarding this letter.

Sincerely,

Michelle Noddings
Social Worker II
mnoddin@dhs.state.ia.us
417 E. Kanessville Blvd.
Council Bluffs, IA 51503
(712) 328 - 5713

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 1-800-945-9778.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).